

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	600	68904	2/21/00
O.I.P.E. CLASSIFIER		16	2-16-00
FORMALITY REVIEW	JW	68786	4-03-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ Rejected N ..... Non-elected  
 = Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 . Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/25/00
2	✓	✓	1/25/00
3	✗	✗	1/25/00
4	✓	✗	1/25/00
5	✗	✗	1/25/00
6	✓	✓	1/25/00
7	✓	✓	1/25/00
8	✓	✓	1/25/00
9	✓	✓	1/25/00
10	✓	✓	1/25/00
11	✓	✓	1/25/00
12	✓	✓	1/25/00
13	✓	✓	1/25/00
14	✓	✓	1/25/00
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If more than 150 claims or 10 actions  
staple additional sheet here